	Approved for use through 10/31/2002. OMB 0651-0031
U.S. Paten	rademark Office; U.S. DEPARTMENT OF COMMERCE
95, no persons are required to respond to a collection	information unless it displays a valid OMB control number.

PETITION FOR EXTENSION O	F TIME UNDER 37	CFR 1.136(a)		Docket RTI-1	Number (Optional) 12R # //		
OIPE	In re Application of:	Bianchi et al.					
7 7002	Application Number:	09/782,594	Fi	iled:	2/12/2001		
MA DI LOSS	For: ASSEMBLED	IMPLANT					
To Bell Co	Group Art Unit: 1615		Examiner: U	Jnknov	vn		
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.							
The requested extension and appropriat (check time period desired):	e non-small-entity fee ar	e as follows					
One month (37 CFR 1.1	7(a)(1))				\$ <u>110.00</u>		
Two months (37 CFR 1	.17(a)(2))				\$ <u>400.00</u>		
Three months (37 CFR	1.17(a)(3))				\$ <u>920.00</u>		
Four months (37 CFR 1	.17(a)(4))				\$ <u>1,440.00</u>		
Five months (37 CFR 1.					\$ <u>1,960.00</u>		
Applicant claims small entity above is reduced by one-half,	status. See 37 CFR 1.27 and the resulting fee is:	7. Therefore the \$	fee amount s	hown			
A check in the amount of the	fee is enclosed.						
Payment by credit card. Form	n PTO-2038 is attached.						
The Commissioner has alread application to a Deposit Acco	ount.						
The Commissioner is hereby or credit any overpayment, to I have enclosed a duplicate co	Deposit Account Numb	fees which may er	be required,				
I am the applicant/invento	or						
Statement u	d of the entire interest. Sinder 37 CFR 3.73(b) is e						
attorney or agent	of record.						
	under 37 CFR 1.34(a). mber if acting under 37 CFR !	.34(a)	·				
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.							
10-17-2001		<u> </u>	()	DE	2		
Date		•	Signature				
		Timo	thy H. Van D Typed or pr		name		
NOTE: Signatures of all the inventors or assigne than one signature is required, see below.	ees of record of the entire inter	est or their represent	tative(s) are requ	ired. Su	ibmit multiple forms if more		
Total of forms are submitted.							
Burden Hour Statement: This form is estimated to take 0 you are required to complete this form should be sent to the COMPLETED FORMS TO THIS ADDRESS. SEND TO TEFFERA 00000060 09782594	he Chief Information Officer, U.S.	Patent and Trademark	Office, Washington,	tual case. , DC 202.	Any constituting the same of t		

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